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APR 20 2006Patrick J. O'Connell
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| To: Examiner Darwin P. Erez Group Art Unit: 3731 Serial No.: 10/823,139 Company: United States Patent and Trademark Office Location: Arlington, VA Phone: 571-272-4695 Fax: 571-273-8300 | From: Patrick J. O'Connell Direct phone: 612-334-8993 Date: April 20, 2006 Pages including cover sheet: 16 Reference #: 620 |
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Comments:**Certification of Facsimile Transmission**I hereby certify that 16 pages including cover are being facsimile transmitted to the Patent and Trademark Office on the date shown below:Date: April 20, 2006Signature: Jodi JungName: Jodi Jung

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: John C. Oslund et al.

Attorney Docket: EV31010USD1

Serial No.: 10/823,139

Group Art Unit: 3731

Filed: April 13, 2004

Examiner: Darwin P. Erez

For: DISTAL PROTECTION DEVICE

**RECEIVED
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APR 20 2006****TRANSMITTAL**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment and Response (13 pages).

- ☐ The fee for a ____-month extension of time is enclosed.
- ☐ No additional claim fee is required.

The fee has been calculated as shown below:

| | | | | | Small Entity | | Other than a Small Entity | |
|--|---|-------|---|----------------------------|--------------|------------------------|------------------------------|------------------------|
| | Claims remaining after amendment | | Highest number previously paid for | Extra Claims Present | Rate | Addit. Claim Fee | Rate | Addit. Claim Fee |
| Total | 32 | Minus | 27 | 5 | x 25 | | x 50 | 250.00 |
| Independent | 6 | Minus | 5 | 1 | x 100 | | x 200 | 200.00 |
| First presentation of multiple dependent claim | | | | | x 180 | | x 360 | 0 |
| Total | | | | | | | Total | \$450.00 |

- ☒ Please charge Deposit Account No. 16-2312 in the amount of \$450.00 to cover the additional claims fee.

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Applicants: John C. Oslund et al.

Serial Number: 10/823,139

Attorney Docket: EV31010USD1

- ☐ A check in the amount of \$_____ is enclosed to cover the additional claims fee.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2312.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17.

Respectfully submitted,

Date: April 20, 2006By 

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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RECEIVED
CENTRAL FAX CENTER**APR 20 2006****AMENDMENT AND RESPONSE**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the January 20, 2006 Office Action, please enter the following amendments and remarks.

04/24/2006 JBALINAN 00000037 162312 10823139

01 FC:1202 250.00 DA
02 FC:1201 200.00 DA

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